

Entry Blank—Please Type or Print

~~Table Paper
Received~~

- Ms./Artist
 Mr./Artist

Permanent
Address

BARBARA J. Myles M:

(last name last)

5960 Northview Dr. Seven Hills

Street

City

44131

Daytime Tel. (216) 524-5363

Zip

area

Temporary or
Studio Address

12828 McCracken Gapfield Hts

Street

City

44125

Daytime Tel. (216) 475-4865

Zip

area

If you do not presently live in one of the counties of the Western Reserve, in which county were you born? _____

Collaborator (if any) _____

If May Show entries are not accepted or are not sold:

- Artist will pick up at Museum.
 Museum should dispose of.
 Museum should ship to artist at artist's expense:

Street

City

State

Zip

Special Instructions

Entry Blank must be completed in full and signed; forms received unsigned will not be accepted.

When necessary, include instructions or a drawing for assembling and displaying an object.

Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by the dates given herein. It is also understood that accepted objects will remain on exhibition until September 5, 1993.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed herein.

Signature

Barbara Myles

I have received the unsold/unaccepted object(s) in good condition.

Signature

X Barbara Myles 9/15/95

Entry Blanks

Detach entire portion along dotted line and submit with slides, but retain tags

A

- | | | |
|------------------------------------|------------------------------------|--|
| Specify category: | <input type="checkbox"/> Sculpture | <input checked="" type="checkbox"/> Crafts |
| <input type="checkbox"/> Paintings | <input type="checkbox"/> Graphics | <input type="checkbox"/> Photography |

Materials used (media):

 HANDMADE PAPER,
 PINENEEDLES

Title "TouchI"

Price or NFS 1,500.00	Insurance Value if NFS Only	Size 32" x 11" x 19" height x width x depth
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GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. in Edition	Price of Print Unframed	Price of Frame Only
ACCEPTED	DO NOT WRITE IN THIS SECTION		ACCEPTED
NOT ACCEPTED <i>X</i>	1 22 abc Mi		NOT ACCEPTED

B

- | | | |
|------------------------------------|------------------------------------|--|
| Specify category: | <input type="checkbox"/> Sculpture | <input checked="" type="checkbox"/> Crafts |
| <input type="checkbox"/> Paintings | <input type="checkbox"/> Graphics | <input type="checkbox"/> Photography |

Materials used (media):

 HANDMADE PAPER,
 PINENEEDLES, HORSEHAIR, BONE

Title "Atmospheric Breath"

Price or NFS 2,500.00	Insurance Value If NFS Only	Size 30" x 28" x 19" height x width x depth
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GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. in Edition	Price of Print Unframed	Price of Frame Only
ACCEPTED <i>X</i>	DO NOT WRITE IN THIS SECTION		ACCEPTED <i>X</i>
NOT ACCEPTED <i>X</i>	2 (one) 1 23abc Mi		REC'D <i>MH</i> NOT ACCEPTED DATE <i>5/13</i>

1993 MAY SHOW
The Cleveland Museum of Art
Cleveland, Ohio 44106

Name

BARBARA J. Myles

Address

5960 Northview Drive

City & State

Seven Hills, Ohio

^{Zip}
44131

Notification #2

*Do Not
Detach*

A

- Paintings Graphics Photography
 Sculpture Crafts

p.pw

Title

"Touch I"

DO NOT WRITE IN THIS SECTION	ACCEPTED	NOT ACCEPTED
		<i>X</i>

B

- Paintings Graphics Photography
 Sculpture Crafts

p.pw

Title

"Atmospheric BREATH"

DO NOT WRITE IN THIS SECTION	ACCEPTED	NOT ACCEPTED
<i>2 (mi)</i>	<i>X</i>	

Return of Objects

Not Accepted: June 1-5 Accepted: September 14-18

It is understood that the Museum shall have the right to dispose for its own account any object not called for by the dates listed.

THIS IS YOUR ONLY RECEIPT TO CLAIM YOUR OBJECT